

Fundraising Request Form

Organization Making Request: _____

Advisor: _____

Type / Purpose of Fundraiser: _____

Type of Fundraising & Strategy: _____

_____ Internal (in school) _____

_____ External (in community) _____

If external, type of ID to be used: _____

Facility Space Required/Requested? ☐ No ☐ Yes, confirmed (enter permit #) _____

Fundraising Dates: Beginning: _____ Ending: _____

Approved By:

Advisor Date

Activities Director Date

Principal Date

Superintendent Date

Student Activity Accounts

*(Student signatures required for
Student Activity Account fundraisers)*

Student Representative Date

Student Representative Date

Request must be submitted at least 20 calendar days in advance of fundraiser to meet necessary deadlines